

Provider alert

Medicare Plus BlueSM
Category: Billing/claims/coding

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Skilled nursing facility claim reviews for Medicare Plus Blue resume June 1, 2025

Starting June 1, 2025, EXL, an independent company that reviews claims for Blue Cross Blue Shield of Michigan, will resume auditing Medicare Plus Blue skilled nursing facility claims.

SNF level of care is reasonable and necessary if the patient meets all requirements. The audits will verify that the skilled nursing facility level of care is reasonable and necessary, and that the provided documentation meets the requirements.

EXL will review the documentation to ensure that an appropriate number of days are billed for the Patient Driven Payment Model score generated on each Minimum Data Set assessment based on the Centers for Medicare & Medicaid Services guidelines.

Audit details

The audits will look back 12 months at claims and review the following:

- Accuracy of billed days
- Comparison of the PDPM score billed to the actual level of services provided
- Detection, prevention, and correction of waste and abuse
- Facilitation of accurate claim payment

What to expect

Be ready to share medical charts. After an audit, EXL will send a letter with findings and information about requesting a reconsideration, if applicable.

- Once you receive a medical record request, no further adjustments can be made to the related claims.
- No rebilling is allowed to correct billing mistakes or other errors.
- Inform your billing and finance departments of the claims being audited.

Look for an article in the May issue of *The Record* for more information.

If you have questions, call EXL's customer service number at 1-833-717-0378.

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